STATE OF SOUTH CAROLINA (Caption of Case) Example: Application for a Class C Charter Certificate from John Doe dba Doe's Limo) BEFORE THE PUBLIC SERVICE COMMISSION OF SOUTH CAROLINA)		
	RECEIVED DEC 1 4 2012 OLERK'S OFFICE)) DOCI) NUMI) If this is your fir) have a Docket N	Set time filing an application with the PSC, you will not lumber. The Commission will assign one to you. If you he Commission before, a Docket Number was assigned	
(Please type or print Submitted by: Address:	Jabari Seabrook 164 Market St - 331 Charleston SC 29401	Telephone: Fax: Other: Email:	843.425.9866 843-628-7718 jabari@tntlimoservices.com	
NOTE: The cover sheet and information contained herein neither replaces nor supplements the filing and service of pleadings or other papers as required by law. This form is required for use by the Public Service Commission of South Carolina for the purpose of docketing and must be filled out completely. NATURE OF ACTION (Check all that apply)				
Application -	– Class C Taxi – Class C Charter – Class C Charter Bus		Request to Amend Scope of Authority Request to Amend Tariff (rate increase, etc.) Request to Amend Passenger Limit	
Application -	- Class C Non-Emergency - Class E Household Goods		Request Exhibit	
Application	- Class E Hazardous Waste		Late-Filed Exhibit Letter Proposed Order	
→ Public Conve	Order Granting Authority to Obtain Certificate on induced and Necessity to Be Rescinded Cancellation of Certificate outpension		Publisher's Affidavit Reservation Letter Response	
Request for R	·		Return to Petition Other:	

CLASS C REINSTATEMENT FORM

File the original with: Public Service Commission of South Carolina Clerk's Office Motor Carrier Matters P.O. Box 11649 Columbia, S.C. 29211 (803) 896 - 5100 FAX (803) 896-5199	Mail or fax a copy to: S.C. Office of Regulatory Staff Transportation Department 1401 Main Street, Suite 900 Columbia, S.C. 29201 (803) 737-0578 FAX (803) 737-0815
DATE: 12/14/12	•
Please consider this an application for Reinstateme	nt of my:
Taxi Certificate Number	
Charter Certificate Number 7896 9	
Charter Bus Certificate Number	
Non-Emergency Certificate Number	
My certificate was revoked/cancelled on 12/16/10/10/10/10/10/10/10/10/10/10/10/10/10/	
I am seeking reinstatement because	INNUAL REPORT IS COMPLETE
GUD HAS BEEN SUBMITTED TO	CARDLE PHAULUIN
TOP LOTCH TPANSPORTATION + Line Serv (Name of Company)	(if applicable)
(Street Address)	(Mailing Address if different from Street Address)
(City, State, Zip Code)	(Signature)
843 425-9866	_ owner/president
(Telephone Number)	(Title) Owner, President, etc.

Transportation CARRIER ANNUAL REPORT

CLASS C - TAXI - CHARTER - NON-EMERGENCY

C

Transportation

Top Notch Transportation & Limo Services, llc

Exact Legal Name of Respondent

PSC/ORS Number (leave blank)

FOR THE YEAR ENDED 2010

[X] Calendar Year Ending December 31, 2011

[] Fiscal Year Ending __

9